# Citizen Engagement Project

# **Owner-Occupied Repair Program**



The purpose of this project is to understand the factors and forces that result in positive **homeowner experiences** with the CDBG Owner-Occupied Repair program. As improving homeowner quality of life is a key outcome of the program, understanding homeowner needs and experiences with the program are key to developing **customer service-oriented program policies** that accomplish both **program and agency objectives**.

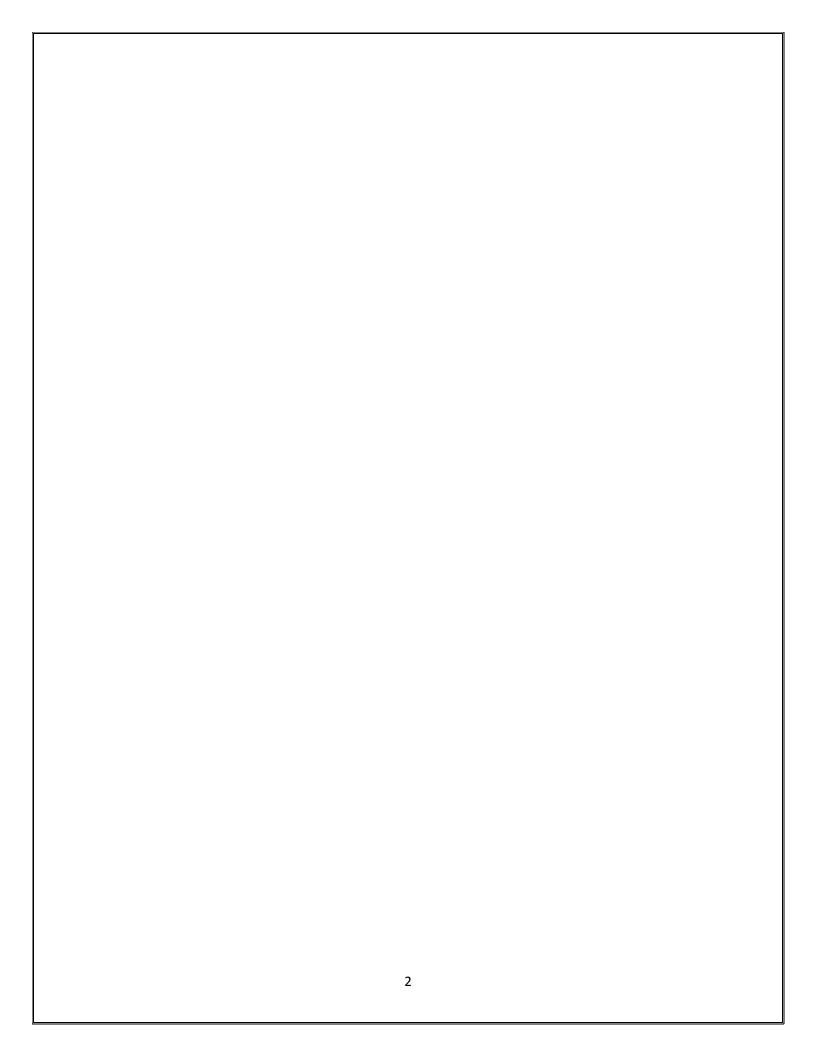
This project has three main data-collection phases:

Identification of IHCDA Staff
Priorities Recipient and Administrator Interviews Interviews

This report walks the reader through the process of conducting the study, and the results attained along the way. The ensuing discussion compiles the information attained during each data collection phase and discusses the similarities and differences between the IHCDA staff, OOR recipient and administrator, and homeowner experiences with the program.



This project is a collaboration between the IHCDA Research & Innovation and IHCDA Marketing & Communications Departments. For more information about the project, please contact Rebecca Nannery at <a href="mailto:rnannery@ihcda.in.gov">rnannery@ihcda.in.gov</a> or 317.232.7777. Kudos to Elizabeth Patel for her role in the project.



# **Summary of IHCDA Staff Priorities**

Identification of IHCDA Staff Priorities

Recipient and Administrator Interviews

Homeowner Interviews

# Methodology & Results:

We sat down with IHCDA directors, managers, analysts, and auditors from the Real Estate Production, Design and Construction Review, and Compliance Departments to hear their perspectives of and experiences with the program. Based on feedback about what RED staff thinks are key issues affecting the experiences of homeowners served by the program, the following themes emerged:

- Homeowner selection for the program
- Effective communication with homeowners, including:
  - Priority List
  - Total value of repairs
  - o Lien
  - Whom to contact when there are problems
- Length of time until completion of administrative elements, including income verification schedule
- Is the **service plan** needed and/or used? Is it an effective means of promoting self-sufficiency and/or aging-in-place?
- Challenges related to **contractors**:
  - Lack of contractor supply
  - o Homeowner cannot choose the contractor
  - o Lack of follow-up during the repair process
  - Lack of oversight of homeowner and contractor interaction
  - Communicating ongoing maintenance needs to the homeowner
- Outcomes, including how the repairs have affected the homeowner's quality of life
- Customer service, including which program elements or actions contribute to a positive homeowner experience

# **Opportunities for Staff Engagement:**

- 1. Completion of at least two different **homeowner visits** annually by all IHCDA OOR-affiliated staff. These visits should represent awards targeting both towns and rural areas and include awards administered by at least one mission-driven (nonprofit) organization.
- 2. Quarterly OOR-affiliated **staff meetings** across Real Estate Development Departments to discuss different perspectives, experiences, and issues, including policy updates and program changes.

# **Recipient and Administrator Perspectives**

Identification
of IHCDA Staff
Priorities

Recipient and Administrator Interviews

Homeowner Interviews

# **Methodology:**

During May of 2015, we visited and **interviewed** five OOR recipients and four grant administrators, representing **seven different OOR awards** throughout the State. Interview questions with a **customer service focus** were designed to gain a better understanding of how recipients interact with program beneficiaries. The questions also probed issues that RED staff members identified as key to a positive program experience for the beneficiary.

Eight funding recipients from a single OOR funding cycle were selected for interviews. These awards represented each of the four geographical regions represented by RED production staff. Additionally, the recipients were selected based upon their **organizational type**, **experience and readiness**, and **program characteristics**.

Organizational type refers to whether award recipients were Local Units of Government (LUG) or nonprofit organizations (NPO). We selected a mix of recipients – of the grant recipients, half were LUGs, and half were NPOs. Of the four recipient nonprofit organizations, two were Area Agencies on Aging (AAA), three were Community Action Agencies (CAA), and two were state-certified Community Housing Development Organizations (CHDO). Of the NPO recipients selected, three of these self-administered their award. All the LUGs hired administrators to implement the programs. We selected one quasi-public entity, one NPO, and two for-profit businesses among the grant administrators.

The experience of the recipient and administrator pair was calculated by number of years of experience with an OOR grant, and number of previous OOR grants. Readiness to proceed with the award was indicated in applications as the proportion of beneficiaries already identified to participate in the program. Cases were selected based upon high versus low relative experience and readiness.

The degree and timeliness of funding award expenditure, a measure developed by IHCDA program staff, was also taken into consideration.<sup>2</sup> The funding analyzed was a single cross-section of expenditure percentages, as of early April, 2015.

<sup>&</sup>lt;sup>1</sup> Since 2008, for each recipient and partner, this is the sum of the total number of OOR projects awarded, plus the number of calendar years awards were received. The experience score for an award doubled when the applicant was its own administrator.

<sup>&</sup>lt;sup>2</sup> Timely expenditure for this cohort was defined by IHCDA staff as 95% or greater expenditure of funds claimed, within the 15-month funding deadline upon receipt of the award.

Finally, the different sites selected also varied in terms of the number of units proposed and the proportion of housing units to be repaired that were dedicated to extremely low income households.

Of the eight awards, we were able to interview individuals representing both the recipient and the administrative perspectives for five of the awards. Two of the awards went to very small towns, and we were unable to make contact with the LUG representatives; thus, we were not able to interview the LUG recipients themselves. However, we were able to interview their OOR program administrator. One of the CAA recipients was difficult to reach to obtain an appointment, so we were not able to interview anyone from that site.

# **Recipient/Administrator Interview Results:**

This part of the report is organized by interview question, with a summary of the qualitative responses. Some responses across those interviewed were similar to each other, while others generated a variety of responses.

# Question #1: What caused you to apply for OOR funds?

When asked why they chose to apply or become involved in the application for OOR funds, the most common answer was **need for the program** in the community, which was expressed by at least one interview respondent from each site. The second most common answer was **citizen interest** in the program, with half of the sites mentioning that active citizen or participant interest influenced their decision to apply. This was especially the case in areas that previously had an OOR award—some even had waitlists remaining from the previous award(s).

There were a number of less frequent responses that also deserve mention. Two respondents noted that the relatively low match requirement made application possible for them; two said that they applied because they had done so in the past. At least one respondent noted Aging-in-Place as a motivation. A respondent from an AAA noted that this program results in stability on the community level as well as the individual level, through the preservation of the character and link to historical identity that older people add to the fabric of the community. Another stated that the directly observable results of the program were reason to re-apply for the program. Additionally, eligibility for Weatherization funds was mentioned as a reason for application by one respondent. Thus, OOR may function as a gateway to eligibility or enhance the effectiveness of other services. For example, OOR can address issues that would otherwise result in a denial of eligibility of a home for Weatherization.

Table 1: Question #1 Responses

Reason for Application	Number of Mentions
Need	6
Citizen Interest	3
Easy to Match	2
Historical Applicant	2
Aging in Place	1
Community Stability	1
Observable Results	1
Weatherization	1

# Question #2: What elements of program application and implementation are you involved with or aware of?

The interviews revealed that the NPO, **mission-based recipients were more involved** with the program application and implementation processes than LUG recipients, whether or not the former administered the programs themselves. LUG participation in these processes is typically low, with the administrator or sub-recipient doing most of the work.

Table 2: Question #2 Responses

	Public	Nonprofit	For-profit
Recipient	medium-high very low very low very low	high high high	ineligible
Administrator	high	high	medium-low high

# Question #3: How did you identify which needs to address in your community? How did you decide who to prioritize?

Not all respondents adequately answered this question; however, the responses we received reflected that need identification and prioritization could be mission-driven, or the respondent's organization might "just know" that there is need generally or as a part of some population.

## Question #4: How did you let your constituents know that this program was available to them?

The recipients and administrators mentioned a variety of methods by which their programs were marketed to attract potential beneficiaries. **Engagement of community partners** who directly provide or connect people with services, with the greatest number of responses, is key to informing the public about the program, particularly through referrals, spreading the word to their clients, and making the case for community support of the program. While the **media** is utilized in various forms, more informal methods of publication are commonly used, including **word of mouth** and **flyers**. One respondent specifically mentioned that, as an organization that has received multiple awards, a waitlist already existed from previous awards, and this list was utilized for targeting purposes. One LUG's publicity efforts were particularly interesting, as the municipality televised the OOR public meeting on local television, engaging with a broader audience than typically attends public meetings.

**Table 3: Question #4 Responses** 

Marketing Strategy	Number of Responses
partner engagement	4
flyers	3
media	3
word of mouth	3
public meetings	2
events	1
participant engagement	1
referrals	1

## Question #5: How were homeowners identified or selected for the program?

Older adults and households with the lowest area median incomes/greatest need were typically prioritized over others. This is not surprising, as two of the recipients interviewed are AAAs, and the application developed by IHCDA prioritizes **older people** and people with disabilities/accessibility challenges. Addressing poverty in general was a theme, with one respondent noting that one of the ways the organization prioritized beneficiaries was based on safety and health issues.

After prioritizing the populations specified in the applications, there was a tendency to favor a **first-come**, **first-served** approach on a [waiting] list, as this was considered to be the fairest approach. Many of those interviewed saw IHCDA's program parameters as a built-in "**greatest need**" approach that automatically prioritized challenging cases.

In particular, one participant mentioned IHCDA policy as a driver affecting applicant prioritization, and had developed a tool to make this kind of selection easier. This is testament to how important it is for IHCDA to be thoughtful about application content, design, and point distribution, as this drives applicant behavior, and thus beneficiary outcomes.

**Table 4: Question #5 Responses** 

Beneficiary Selection Process	Number of Responses
older people	4
greatest need	4
first come, first served	3
accessibility	2
IHCDA policy	1
safety and health	1

Question #6: How did you communicate about the application, verification, and repair process to homeowners? What worked well? What was confusing?

A theme with regards to how application, verification, and repair processes were communicated to program beneficiaries was that it occurred through direct contact, especially **one-on-one** or **face-to-face**. Trust is important for

quality communication, and one way that some of the respondents cultivated this was by also working with the family members of the beneficiaries through the application and repair process.

Table 5: Question #6 Responses

Type of Communication	Number of Responses
one-on-one	3
face-to-face	3
telephone	2
family members	2

While IHCDA staff believed the priority list would be an area of confusion for program beneficiaries, none of the respondents indicated that this was the case. If there was confusion, it was because homeowners thought the policy didn't make sense or that it didn't always meet their needs, not that they didn't understand it.

However, the respondents did note that the **lien requirement and affordability period caused confusion** among some homeowners and at times was mentioned by homeowners as a disincentive to participate. Multiple respondents noted that beneficiaries were concerned that they would not know when the affordability period would end prior to the repair taking place, as the affordability period doesn't begin until the repair is completed and final inspection takes place. Additionally, many seniors felt uncomfortable about having liens placed on their homes, particularly in terms of end-of-life planning.

Finally, two respondents mentioned that applicants sometimes feel confused about the program because it seems "too good to be true."

Table 6: Question #6 Responses

Area of Confusion About Program	Number of Responses
lien a problem	5
too good to be true	2
priority list a problem	0

# Question #7: Did the timing of the program application cycle and beginning the repair process affect the homeowner's experience with the program?

The respondents did not feel that the program application process and the beginning of the repair process affected the beneficiary's program experience. An exception was when potential applicants were identified prior to the OOR program application being released, but became ineligible by the time the beneficiary applications were processed and accepted. The time lag can also cause homeowners to wonder if they are still on the list to receive a repair.

Question #8: Prior to applying for OOR funds, did you have service agreements with local providers for other programming that you administer, or do you provide some of the appropriate services yourself? From your perspective, is having a service plan relevant to the program? Is providing any sort of service or referral for service relevant to the program?

Interviewees were split with regards to whether they thought a service plan is a beneficial part of the program. The recipients with the most buy-in with regards to providing accompanying services were the AAAs. These were the only interviewees that described in detail the investment of a significant amount of time with their clients to ensure that needs are met. Without as strong of a service-based mission, LUG recipients seemed less invested in this. In the mission-based scenario, the person and his or her needs tends to be the focus of the program, while in the latter case, the repair acts as the main focus of the program. As one interviewee noted, if the objective of the OOR program is to focus on the home, a service plan isn't relevant; however, if the objective is to focus on the person (e.g. through an Aging-in-Place approach), then providing services to program beneficiaries makes sense. Another respondent viewed the evaluation of the person's function in his or her home as important as evaluating the home itself. AAAs reported spending more time assessing client needs than other recipients and administrators, and non-AAA recipients and administrators frequently referred homeowners to the local AAAs.

With regards to including a service plan as a part of the application, one interviewee stated that it does not make sense to assign points related to a service plan but not follow up on the extent to which it is implemented or effective. An OOR program with an integral service component should involve an organization whose *mission* is to provide the relevant services. The actual act of service provision or referral, when not already related to an organization's mission, appears to be cursory and in accordance with IHCDA's expectations, with little attention to it beyond MOUs with service providers and points on the application.

A couple of interviewees in rural areas mentioned that attaching points to the service plan made crafting a competitive application difficult for them, since in rural areas, service provision is often absent or uneven in coverage. They themselves may be the sole provider of the services that are offered to their clients.

One interviewee mentioned that an OOR recipient from a different funding cycle in Auburn, IN, utilized a home health worker to accompany inspectors on visits. It might more productive to **include a service provider** such as a AAA as a part of the development team. This could be a funded, contracted relationship with the service provider responsible for intake and follow up on appropriate referrals for additional services.

## Question #9: What are the most common issues faced by the population(s) targeted by the program?

There was not a consensus among interviewees with regards to this question. This could be for at least three reasons: (1) There is variation across the State and the populations served; (2) the question was too broad for them to be able to give a specific answer (many had difficulty answering); and/or (3) they are not aware of the needs of the target population. Two different interviewees mentioned limited mobility and lack of transportation as challenges. Other issues mentioned at least once include accessibility, community with other people, cognitive impairments, food security, and poverty in general.

One interviewee explained that **sometimes addressing poverty supersedes addressing accessibility**. Multiple interviewees described poverty as a primary concern facing the program beneficiaries, and may drive or be used to drive some application items, such as the service plan.

# Question #10: Do you have a sense of whether these individuals or families were already receiving available assistance to address their needs? What was their response to a referral (when applicable)?

Whether or not the interviewees had pre-existing knowledge of whether the program beneficiaries were already receiving assistance was mixed, with only some of the interviewees indicating awareness of what services were already being provided. Multiple interviewees recalled that homeowner response to the offer of a service referral is generally positive.

# Question #11: Have you received feedback from the administrator with regards to identification, selection, and communication with the contractors who are working on or have completed the home repairs? Have you received feedback from any of the homeowners about their interactions with the contractor, including the work that was completed?

The availability of good contractors (or any contractors at all) appears to be **mixed** among the sites. Some have several good, reliable contractors who bid regularly, usually as the result of relationship and trust building between the recipient or administrator and the contractor over time. A couple of interviewees noted that guaranteeing contractors regular payments is also helpful to attract them to bid on projects, although this is partially dependent upon the ability of the recipient to be able to "float" the money prior to program **reimbursement** through IHCDA. Those recipients which struggle with identifying qualified contractors usually cite **lack of contractor capacity** to address federal requirements, including mandatory certifications and a large amount of paperwork.

The interviewees report that the homeowners seem generally satisfied with the contractors and the work they do, with a few exceptions.

# Question #12: How are homeowners given a voice with regards to their experiences with the program? What formal or informal opportunities exist for [logistical] communication from the homeowner to you?

Generally, the applicants and administrators do not actively facilitate opportunities for homeowner voice with regards to the program, with the exception of one site that administers surveys to the homeowners at the end of the program. Most opportunities for homeowner voice are **informal and passive** in nature and in response to items pertaining directly to the application and repair processes themselves. These communications were primarily conducted through word of mouth, face-to-face interaction, and telephone calls. Development of **trust** with homeowners is key to enabling them to feel comfortable communicating about the program with the program recipients and administrators.

## Question #13: What do you think are the characteristics and results of a successful OOR program?

The interviewees had a number of different ideas about what *characteristics* are necessary for a successful OOR program (Table 8). The most common responses centered around the idea of an **organized** program, defined as working ahead to give enough time to avoid or address problems. Two interviewees mentioned great **customer service** as an important characteristic. Others mentioned good communication with homeowners about the program throughout the application and repair process; staying **in compliance** with IHCDA regulations; and being wise about how and where program money is spent.

Table 7: Question #13 Responses

Characteristics of a Successful OOR Program	
Organized 3	
Customer service	2
Communication	1
In compliance	1
Fiscal viability	1

Similarly, the interviewees had a number of different ideas about what the *results* of a successful OOR program are. Analogous to customer service as a characteristic, **customer satisfaction** resulting from a successful program was mentioned by interviewees representing four of the seven sites (Table 8). Also mentioned twice was **improved conditions** for the homeowner. Reduced or stable foreclosure rates, keeping people in their homes for longer periods of time, improved neighborhoods, and a repair that makes a difference to the homeowner were all mentioned at least once as outcomes of a successful OOR program.

Table 8: Ouestion #13 Responses

rable of Question #20 Hespoises	
Results of a Successful OOR Program	
Customer satisfaction 4	
Improved conditions	2
Foreclosure rates	1
Aging-in-Place	1
Community development	1
Homeowner's needs met	1

# Question #14: Do you think there are ways that IHCDA can be more attuned and responsive to the needs of the homeowner?

These responses varied widely, with many interviewees unable to or possibly uncomfortable with providing a direct answer. The two main themes that emerged were related to better understanding the issues OOR homeowners face, and using this and other data to shape program policy:

• **Client-Centric Priority List:** Re-examine the priority list to ensure that it is reflective of OOR beneficiary needs, and provide an explanation of why this is so for each priority item.

- **Homeowner Surveys:** Have a ten-month post-repair re-inspection to assess repair quality and to administer a survey. Investigate the issue of ongoing home maintenance and who, if anyone, conducts this (e.g. themselves or someone else).
- *IHCDA Staff Field Training:* Facilitate IHCDA staff (especially monitoring staff) going out into the field particularly individual homes to see and understand what the recipients do.
- **Aging-in-Place Training:** Have IHCDA staff and grantees/administrators attend the University of Indianapolis training on aging.
- **Rural Issues:** IHCDA should become more deliberate in incentivizing awards directed toward rural homeowners, as there are challenges to seeking out and serving this population that more populated areas do not experience.
- **Data-driven decision-making:** Align target population with the desired program impact, based upon existing data.

The other ways by which IHCDA can be more responsive to the needs of the homeowner-beneficiary (and the OOR recipients/administrators) are as follows:

- A mock or simulated compliance monitoring would help recipients and/or administrators know what IHCDA compliance staff is looking for during monitorings.
- Consider relaxing the [environmental and other] studies related to the application process, since for recipients applying back-to-back funding cycles or years, there probably isn't much difference in the information submitted with the previous application.
- Create a basic brochure outlining the program that they can give to potential program beneficiaries.
- Sending IHCDA staff members to speak about OOR at local government and regionally-based meetings would be beneficial for LUGs as they work to serve their constituents.
- Provide a list of relevant trainings (held by IHCDA or other entities, if applicable) ahead of time, so their staff can attend these prior to program administration.
- Facilitate a network of OOR providers who can provide technical assistance or helpful tips to each other.
- Realize the local match is becoming more difficult to procure with traditional match programs being eliminated and the passage of the 2% tax cap.
- Cut red tape "Use common sense!"

# **Beneficiary Experiences**

Identification of IHCDA Staff Priorities

Recipient and Administrator Interviews

Homeowner Interviews

# **Methodology:**

Based on the feedback from IHCDA staff and the five recipients and four administrators we interviewed, we designed a brief **telephone-administered** questionnaire to determine **beneficiary/homeowner perspectives** with regards to **IHCDA program policies**. The questionnaire was limited to **five questions**, so that interviewees would not be overwhelmed or inconvenienced, and so we would be able to attain the necessary data.

We enlisted the help of the recipients and administrators to obtain the homeowner telephone numbers, and received full and expedient cooperation. The list of homeowners served by each of the seven different sites were randomly ordered within that site. The sampling strategy goal was to attain ten interviews from beneficiaries served by each site, or, in the case of sites with fewer than ten beneficiaries, the entire list of beneficiaries.

The randomized list of homeowners was utilized as follows: The homeowners were called in order of appearance on the list. If a homeowner did not answer the telephone, the interviewer cycled through the list until ten (or the whole list in the case of awards with fewer than ten beneficiaries) interviews were conducted. Any given telephone number received a maximum of three attempts. The response goal and actual number of responses are as follows in Table 9 (sites have been anonymized and reordered to protect the identities of the respondents). **51** of the 64 desired interviews were completed, resulting in an **80% response rate**.

Table 9: Beneficiary Interview Goals and Actual Number of Interviews Conducted

	Site 1	Site 2	Site 3	Site 4	Site 5	Site 6	Site 7	Total
Goal	10	10	9	10	5	10	10	64
Actual	6	9	6	8	3	10	9	51

Prior to the beginning of the interview, the interviewer explained to each homeowner the purpose of the interview and how the information would be used. They were assured confidentiality and that the interview would take no more than 15 minutes, after which they were asked if they wished to participate.

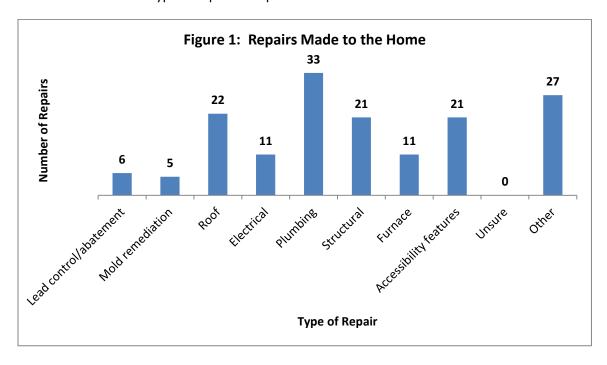
The interview questions were designed to be asked as open-ended questions, with prompts available as necessary. As the interview took place, the interviewer coded the responses to the first four questions into the appropriate categories listed in the graphs in the next section of this report.

# **Interview Results:**

This part of the report is organized by interview question, with a summary of the responses. Because time had passed since the homeowners first applied for the program and went through the repair process, it is possible that validity threats such as a lapse in time since the repair took place leading to memory loss may make some of the responses either inaccurate or only partially accurate. Additionally, we interviewed only OOR beneficiaries who were accepted into the program. The study does not include the perspectives of homeowners who applied but were not served by the program, including those who were eligible but for whom funding was not available.

## Question #1: What repairs were made to your home through the program?

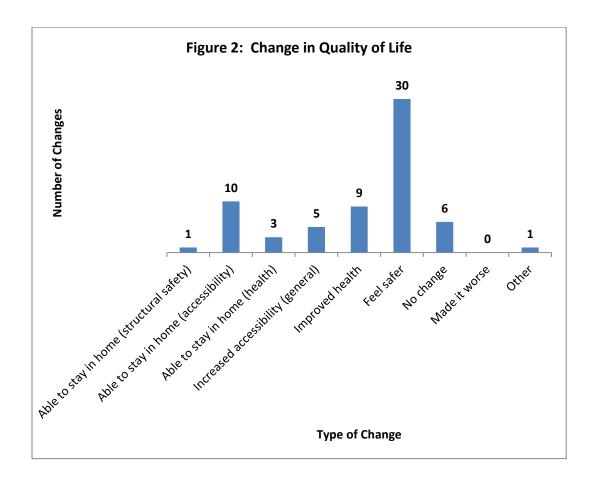
To ease into the interviews and set the stage for the subsequent questions, we began by asking the homeowners what repairs were made to their homes. They were permitted to mention as many as they could. The most common response was plumbing repairs – 33 respondents out of the 51 interviewees, or nearly **two-thirds, mentioned that a plumbing repair was made** to their homes. Other common responses included repairs related to the roof (43%), the house structure itself (41%), and/or accessibility features (41%). Less common responses included electrical (22%), furnace (22%), lead control/abatement (12%), and mold remediation (10%). Finally, more than half of the respondents (53%) mentioned that some other type of repair took place.



## Question #2: Has the repair changed your quality of life?

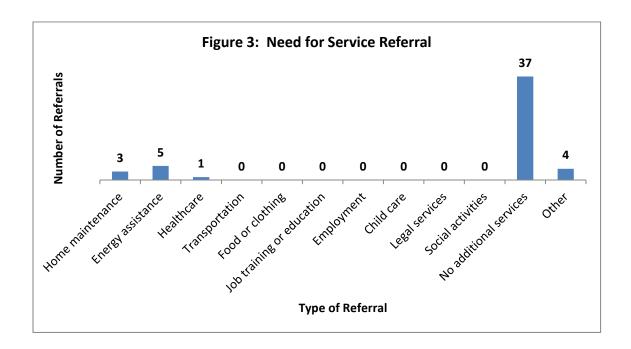
Homeowners were asked whether the repair(s) to their homes resulted in a change in their quality of life. This information was intended to help determine what possible *outcomes* resulted from the program. By far, **the most common response was that the repair made them feel safer** – 30 out of 51 respondents (59%) mentioned this. Aging-

in-Place was a distant second most common response – 20% reported that they were able to stay in their homes because of improved accessibility. Other responses included improved health (18%), increased accessibility in general (10%), the ability to stay in the home because of an effect on their health (6%), the ability to stay in the home because of restoration of structural safety (2%), and some other change (2%). Twelve percent of respondents told the interviewer that the repairs did not result in a change in their quality of life.



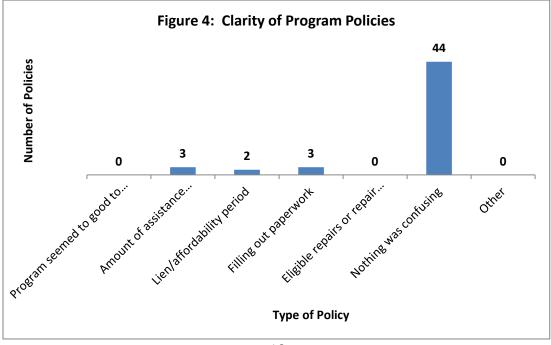
Question #3: Think back to when you first filled out the paperwork for the program or when [the administrator] visited your home to see what needed to be repaired. Were there other programs that were or that would have been helpful to learn more about at that time?

The purpose of this question is to determine whether a service plan is of benefit to program beneficiaries. While we did not ask respondents whether they had received information about additional services/programs that they might need, we did ask them what their needs were at that time. Nearly three-quarters of respondents (73%) stated that they had **no need for additional services upon program admission**. Those who did need services at that time mentioned energy assistance (10%), home maintenance (6%), healthcare (2%), and/or some other service (8%). While these results may be surprising, it is possible that homeowners were already receiving necessary services, that they did not perceive themselves of having a given need, or that they did not have a particular need at that time.



# Question #4: Think back to when you first applied to the program. Were you able to easily understand the program rules and process?

The fourth interview question is designed in response to IHCDA staff concerns about homeowners not understanding the priority list, and recipient/administrator concerns about homeowners not understanding or feeling reluctant about the lien and affordability period, which was only mentioned by one IHCDA staff member interviewed. Despite these concerns, the majority of homeowners – 86% – reported that **they were not confused about the program policies**. A minority of interviewees expressed the following concerns: amount of assistance available (6%), filling out paperwork (6%), and the lien/affordability period (4%). While there were a number of anecdotal mentions of confusion about different program policies, it is important to remember that this is not necessarily representative of all cases.



# Question #5: Is there anything else you'd like to tell me about your experience with the repair program?

This open-ended question produced qualitative data that can be used to help clarify or enrich some of the previous questions, or bring up issues important to the beneficiary that either we hadn't thought of or that were not included in the survey.

Of the 51 homeowners who were interviewed, **two-thirds provided open-ended comments**. Of these 34 comments, 47% were positive in nature, and 38% were negative in nature. It is important to note that while there were a number of negative comments, this does not mean that the beneficiaries were dissatisfied with all elements of the program, or that they were unhappy with the repair(s) or change in living conditions. The comment themes are represented in Table 10:

Table 10. Open-Ended Comments (n = 34)

	Positive	Negative	<b>Total Number</b>
	Comments	Comments	of Comments
Total Positive	16		16 (47%)
Total Negative		13	13 (38%)
Services			7 (21%)
<b>Understanding Processes</b>		7	7 (21%)
Recipient/Administrator Customer Service	8	6	14 (41%)
Contractor Quality/ Service	5	5	10 (29%)
Opportunity to Work with Community Organizations			6 (18%)
Follow-up Needed			8 (24%)

#### Services

Comments related to services had two main themes: Service referrals not being discussed with beneficiaries, or beneficiaries needing services and not knowing how to obtain them. Three homeowners mentioned that service referrals were never discussed with them. Several other clients mentioned a need for additional assistance that, presumably, the OOR assistance did not or could not cover, such as a new furnace.

## **Understanding Processes**

The comments related to program rules and processes were related to either the entire process in general, or the lien placed on the home. Three homeowners mentioned difficulty understanding the program rules and processes in general. One respondent noted that because of difficulty with memory, he/she had trouble retaining the rules and processes with the program. Two homeowners stated that they did not know that a lien would be placed on their properties until the repairs were already underway or completed. Another stated that they signed the paperwork but did not understand what it meant. Another homeowner did not understand the dollar amount of the funding available per home after not all the repairs that were originally promised were completed.

## Recipient/Administrator Customer Service

There were 14 comments related to recipient/administrator customer service, of which eight were positive and six were negative. On the positive side, homeowners generally noted that the administrators were very helpful to them, particularly in terms of explaining the program processes. Negative comments were related to not knowing about or understanding important program elements, or feeling that the recipient/administrator did not adequately follow up on problems related to the repair and/or the administrative process.

## Contractor Quality/Service

Ten homeowners mentioned contractors in their comments. These mentions were half positive, and half negative. The positive comments focused on the quality of the repairs and the helpfulness of the contractors. The negative comments were mainly related to poor quality, including repairs needed on repairs that had been completed through the program. One respondent noted that they were unhappy with the contractor, but this was the only contractor who bid on the project, so there was little choice on the part of the homeowner.

# **Opportunity to Work with Community Organizations**

Through the comments, we were able to identify some areas where IHCDA and/or the recipients/administrators can work with community organizations to enhance the effectiveness of the OOR program. Six of the comments (18%) contained information related to areas where more can be done to connect households to the resources they need. As discussed earlier, several homeowners mentioned they were in need of new furnaces or other appliances or fixtures. One respondent noted that more education was needed with regards to services for older adults. Two respondents felt that there was not enough publicity or outreach when the program was first advertised, potentially resulting in the recipients/administrators missing people who are in great need.

## Follow-up Needed

Finally, eight of the comments (24%) mentioned items needing follow-up. Four respondents mentioned additional repairs or appliances needed, including one instance where the homeowner stated that a promised repair did not happen. One homeowner mentioned that the accessibility-related work done to their home did not result in a more accessible situation. Finally, several homeowners noted that the craftsmanship of the work completed was of poor quality, resulting in appliances and/or fixtures in an unusable condition in two of these instances.

# **Discussion of Findings**

In this part of the report, we compare the results of the interviews with IHCDA staff, OOR recipients and administrators, and the homeowners served by the program to determine similarities and differences that may affect program policies.

## **Communication with Homeowners**

IHCDA staff voiced concerns about the extent to which homeowners understand program process related items, such as the priority list, the total value of the repairs, and the lien. The priority list and the lien were particularly emphasized by either IHCDA staff or by the other interviewees.

Table 11. Communication with Homeowners Responses

	Priority List	Lien
IHCDA Staff	Virtually every IHCDA staff member who was interviewed mentioned the priority list as an item about which they believe homeowners are confused.	Only one staff member mentioned the lien required of the homeowners as a potentially problematic part of the process.
Recipients and Administrators	None of these found the priority list to be a problem – beneficiaries might think it doesn't make sense for their situation, but they understand it.	The majority of the recipients interviewed mentioned the lien as a detriment or a source of confusion, most commonly because of the ambiguity of the affordability period start date prior to project completion.
Homeowners	The vast majority of homeowners found the program rules and processes easy to understand, overall.	Two homeowners mentioned they were unaware they had to sign a lien until after repairs had begun.

Based on the findings above and what was discussed in previous sections, the lien and affordability period should receive more attention from IHCDA staff than the priority list, although the latter should include more of an explanation for the order in which the repairs on it occur. As for the lien itself – this can a detriment to homeowner participation, as some homeowners – especially older people – are uncomfortable with making this type of a commitment when they do not know what the short-term future holds. Additionally, some homeowners do not necessarily understand that they are agreeing to sign a lien when paperwork is processed prior to the repair. Some are uncomfortable with not knowing the end date of the affordability period will be until the repair is completed. IHCDA staff should work with OOR recipients and administrators to determine more effective means of communicating the conditions surrounding the lien and the lien process.

## The Service Plan

The idea of attaching application points to a service plan was born of the desire to integrate IHCDA's mission of integrating a self-sufficiency element into the OOR program. It also originated from supporting Aging-in-Place, a

previous IHCDA strategic priority. IHCDA staff wanted to know if the service plan was needed and/or used by the homeowners.

Table 12. Service Plan Responses

IHCDA Staff	Unsure of whether the service plan is useful or results in promoting self-sufficiency and Aging-in-Place. Should the OOR application continue to feature this?
Recipients and Administrators	No consensus on whether the service plan is beneficial – LUGs were less likely to think so, while the more mission-driven AAAs/NPOs were more likely to think so. For the most part, services and/or referrals resulting from the service plan are perfunctory at best.
Homeowners	The majority of homeowners felt that they did not need additional services at the time of the application and the repair. In the open-ended comments, several homeowners stated that service plan items were never discussed with them.

It was unclear from the recipient/administrative perspective whether or not the service plan is beneficial to the homeowners served by the program. With the exception of a few of the nonprofit recipients, the service plan did not appear to play an important role in any of the programs. Additionally, most homeowners do not appear to believe that the intended function the service plan would have been helpful to them at the time of the repair. However, several homeowners mentioned in the open-ended comments that they were now in need of services and did not know how to obtain these. It is possible that follow-up even after the award has been closed out might help to address ongoing needs of households receiving OOR assistance.

# **Contractors**

As contractors are integral to the repair process itself, IHCDA staff wished to better understand contractor challenges, including contractor supply, degree of homeowner choice, availability of oversight during and after the repair process, and the communication of ongoing maintenance needs to the homeowner by the contractor.

**Table 13. Contractor Responses** 

IHCDA Staff	Knows that finding good contractors can be challenging, and that the informational asymmetry between the contractor and the administrator and/or homeowner can create difficulties.
Recipients and Administrators	The availability of contractors is mixed among sites, but the theme that emerged was that it takes a lot of time and effort to develop relationships with good contractors. The administrative elements of the program are burdensome to contractors, and many do not have the certifications necessary to actually bid for the work. The sense among these interviewees was that homeowners are mostly satisfied with the contractors and the work they do.
Homeowners	In the open-ended comments, about 20% of the 51 homeowners interviewed specifically mentioned the contractor or work performed by the contractor. Of these comments, half were positive and half were negative. Both tended to focus on the quality of the repair craftsmanship.

Investing in building a contractor pipeline with and on behalf of funding recipients currently struggling to find interested and qualified contractors will result in an improvement in contractor availability and quality. IHCDA and others could assist in making the OOR bid opportunities more visible to contractors by publicizing them through the Indiana Builder's

Association, for instance. Additionally, several of the interviewees mentioned that a major limitation was contractors not having the federally required certification (e.g. lead remediation). Partnering with the Indiana Department of Health to provide regional trainings and certifications is one way IHCDA can work to increase the number of contractors who are qualified to bid on OOR projects.

# **Program Characteristics & Outcomes**

During our conversations with IHCDA staff, it became clear that there is a "black box" when it comes to understanding how the repairs have affected the homeowner's quality of life over time, not to mention the extent to which these repairs have been maintained. While this was not a theme that was emphasized in conversations with IHCDA staff, it is an important one that should not be overlooked, as it is a measurement of whether the program objective has been achieved.

**Table 14.** Program Outcome Responses

IHCDA Staff	Unsure of program effect after final inspection and closing of
	award.
Recipients and	The top two characteristics of a successful OOR program are one
Administrators	that is organized and that provides good customer service.
	The top two results of a successful OOR program are customer
	satisfaction and improved conditions for the homeowners.
Homeowners	The majority of homeowners stated that the repairs make them
	feel safer in their homes.

Based on the homeowner response, a sense of **safety in one's home** is an important outcome of the OOR program, and one that was not explicitly stated by most of the recipients/administrators we interviewed. Because of the strong response in this area, RED staff should examine OOR program policies to determine the extent to which these support the outcomes that are most important to homeowners.

An in-depth assessment of quantitatively measured program outcomes, such as reduced energy and health expenses may be an opportunity for further study. Also, understanding the maintenance of the repair(s) and how this relates to beneficiary satisfaction over time could help us to understand the long term benefits of the program and opportunities for further outreach.

We would like to thank the IHCDA staff, OOR award recipients and administrators, and homeowners who participated in this study. We appreciate your generosity with regards to your time and your willingness to share your experiences with us.